Fill in this information to iden	tify your case:	RECEIVED 5	
United States Bankruptcy Court	for the:	AND FILED DLS	
District of Nevada	2º19 .	IAN 25 PM 2 17	
Case number (If known):	רייניט בייניט Chapter you are filing under:		
	☑ Chapter 7 U.S. B	ANKRUPTCY COURT A. SCHOTT, CLERK	☐ Check if this is an
	Chapter 13	a d	amended filing
Official Form 101			
Voluntary Pet	ition for Individuals F	iling for Bankr	uptcy 12/17
the answer would be yes if eith Debtor 2 to distinguish betwee same person must be Debtor 1 Be as complete and accurate a	s possible. If two married people are filing togeth eeded, attach a separate sheet to this form. On th	ed about the spouses separately, the eport information as <i>Debtor 1</i> and eport, both are equally responsible for	he form uses <i>Debtor 1</i> and I the other as <i>Debtor 2</i> . The or supplying correct
Part 1: Identify Yourself			
Your full name	About Debtor 1:	About Debtor 2 (Spou	ise Only in a Joint Case):
Write the name that is on you	r AUDDA		
government-issued picture identification (for example,	First name	First name	
your driver's license or	RENEE Middle name	Middle name	
passport). Bring your picture	ISRAEL	Middle name	
identification to your meeting with the trustee.	Last name	Last name	
with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)	
2. All other names you	nna mas can dhuas nu na airmnn sasuran un kiluara in tanu airmn nu n mhus c'i in un nn na kiluntara aibun makem	und (1997), et e en en el el en en en el especialiste del del est demond de el en el en el el en el el en el e	व्याप्तरामान्त्रं क्रम्प्यः । क्रम्प्याः १००५मा व्याप्तः स्थाना १०५० ह्याः प्राप्तान्त्रम् । १००१ स
have used in the last 8 years	First name	First name	
Include your married or maiden names.	Middle name	Middle name	
Malasi Names	Last name	Last name	
	First name	First name	
	Middle name	Middle name	
	Last name	Last name	
t koroni, koronik koronik koronika alaha koronikati oleh bari koronikat salah	rat ka en sentre de en an autoriorismos es en en el en en en eskaro eskaro en en entre la socialita de area en	, et mant at her restaure side en daneste a ser de redock habite. Hin e de esta en en datain han i	Pediagraphic de la lacad de la describere e e l'en antendeur mais en au de l'appropriée de la contract de l'app L'appropriée de la lacad de la describere e el l'en antendeur mais en au de l'appropriée de la contract de l'a
3. Only the last 4 digits of your Social Security	xxx - xx - <u>5</u> <u>0</u> <u>7</u> <u>7</u>	xxx - xx	
number or federal	OR	OR	
Individual Taxpayer Identification number	9 xx - xx	9 xx - xx	

(ITIN)

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Debto	or 1 AUDRA	RENEE	ISRAEL			Case number (# kr	nown)		
	First Name	Middle Name	Last Name						
057 N - 1/5/97/N	rrent in personita oraș o perfect ea e opinet estatori r	alia merendeko deko Al	oout Debtor 1:	Administration of SEE to Association for the 201	TV STANTES AND STANTAGE SEASON	About De	ebtor 2 (Spouse	e Only in a Joint	case):
a Id	4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		1 I have not used any bu	siness names o	r EiNs.	☐ I have	not used any b	usiness names or	r EINs.
t			usiness name			Business n	ame		
	nclude trade names a doing business as nan	noe —	usiness name			Business n	ame		
		EI	N			EIN			
		ĒI	<u>N</u> — - — — —			EIN —			
5. \	Where you live	smardaffeth einscheinig Strat in Nicht St	era especial de la especial esta especial de la esp	ত প্রায়েশ করে। ত পারের করা দ্বাস্থান্ত হৈ একেবলৈ নারের	needd eerwan amananaeth tan en ffellan e	If Debtor	2 lives at a diff	ferent address:	progreggi engilen bil nested segungste district.
			200 N TORREY PIN	ES DR #114	5	Number	Street		
		Nı	umber Street			Number	Sueet		
		 L	AS VEGAS	NV	89108				
		Ci C	ty CLARK	State	ZIP Code	City		State	ZIP Code
		C	ounty			County			
		al	your mailing address i bove, fill it in here. Note ny notices to you at this r	that the court w	n the one vill send	yours, fil		dress is differen e that the court w g address.	
		N	umber Street			Number	Street		
		P.	O. Box			P.O. Box			
		C	ity	State	ZIP Code	City		State	ZIP Code
	Why you are choo		heck one:	sekalakterin (K. a.) etikonominuse ora ora nese andrina		Check on	10:	н и фануация до 2-1 - 10 г. г. статту и пост	artinona est na di anti menene est a senti anti
	this district to file bankruptcy	for 💆	Over the last 180 days I have lived in this distr other district.	before filing this rict longer than i	s petition, n any	I have		s before filing this trict longer than ir	
			I have another reason. (See 28 U.S.C. § 1408				another reason 28 U.S.C. § 140		

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ISRAEL

AUDRA

RENEE

		First Name	Middle Name				
		rns come ,	moore resine	Last Name			
Dar	rt 2: 1	Fall the Court	About Your	Bankruptcy C	1200		
ган	. 22.	- Court	About Tour				
		apter of the ptcy Code yo			description of each, see <i>No</i> 010)). Also, go to the top of		1 U.S.C. § 342(b) for Individuals Filing he appropriate box.
are choosi	osing to file	🗹 Cha	apter 7				
			☐ Cha	apter 11			
			☐ Cha	apter 12			
			☐ Cha	apter 13			
8.	How yo	u will pay the	loc. you sub with I no App I re By les	al court for mourself, you may omitting your pen a pre-printed eed to pay the plication for Incomplete that my law, a judge mes than 150% o	re details about how you pay with cash, cashier's ayment on your behalf, y laddress. Fee in installments. If y dividuals to Pay The Filin y fee be waived (You manay, but is not required to if the official poverty line to	may pay. Typical check, or money our attorney may ou choose this op a Fee in Installment of the control of the	peck with the clerk's office in your ally, if you are paying the fee order. If your attorney is pay with a credit card or check option, sign and attach the pents (Official Form 103A). Ition only if you are filing for Chapter 7. and may do so only if your income is aur family size and you are unable to must fill out the Application to Have the
		ou filed for ptcy within thears?	√ No	s. District	Whe	mm / DD / YYYY mm / DD / YYYYY	Case number Case number
				District	Whe	MM / DD / YYYY	Case number
		/ bankruptcy pending or be	☑ No				
	filed by	a spouse wh	no is Yes	s. Debtor			Relationship to you
	you, or	ng this case w by a busines r, or by an		District	Whe	MM / DD / YYYY	Case number, if known
,	anmate	• •		Debtor	,,,		Relationship to you
				District	Whe	n	Case number, if known
	Do you resider	rent your ice?	☐ No. ☑ Yes		dlord obtained an eviction ju	dgment against you	1?
				No. Go to			
					out <i>Initial Statement About a</i> is bankruptcy petition.	n Eviction Judgmer	nt Against You (Form 101A) and file it as

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Debtor 1	AUDRA First Name	RENE		ISRAEL Last Name	Case number (# known)			
	1 irst Maine	micore rusine		255.115				
Part 3:	Report Abou	it Any Bi	usinesse	es You Own as a Sole	e Proprietor			
. Ано	vou a cala pro	oriotor	[7] v	n to Doub A				
of a	you a sole prop ny full- or part-		,	So to Part 4.	ta a a a			
	ness? e proprietorship is	. a	☐ Yes.	Name and location of bus	iness			
busir indivi sepa	ness you operate a dual, and is not a rate legal entity si	as an uch as		Name of business, if any				
a cor LLC.	poration, partners	ship, or		Number Street				
	i have more than proprietorship, us							
sepa	rate sheet and att s petition.				OLL TIPO-d-			
to un	s pennon.			City	State ZIP Code			
				Check the appropriate bo	ox to describe your business:			
				☐ Health Care Business	s (as defined in 11 U.S.C. § 101(27A))			
				☐ Single Asset Real Es	tate (as defined in 11 U.S.C. § 101(51B))			
				☐ Stockbroker (as defin	ned in 11 U.S.C. § 101(53A))			
				☐ Commodity Broker (a	s defined in 11 U.S.C. § 101(6))			
				None of the above				
Cha Ban are deb	you filing under apter 11 of the akruptcy Code and you a small business otor?		can set most rec any of th	<i>appropriate deadlines.</i> If y ent balance sheet, stater	the court must know whether you are a small business debtor so that it you indicate that you are a small business debtor, you must attach your ment of operations, cash-flow statement, and federal income tax return or if kist, follow the procedure in 11 U.S.C. § 1116(1)(B). pter 11.			
busi	a definition of small ness debtor, see I.S.C. § 101(51D).	tor, see 🔲 No.		I am filing under Chapter the Bankruptcy Code.	11, but I am NOT a small business debtor according to the definition in			
	v , ,		☐ Yes.	• •	11 and I am a small business debtor according to the definition in the			
					A A Burnardy That Needs Immediate Attention			
Part 4:	Report if Yo	ou Own	or Have	Any Hazardous Prop	erty or Any Property That Needs Immediate Attention			
14. Do j	you own or hav	e any	☑ No					
	perty that pose ged to pose a f		_	What is the hazard?				
of it ider pub	mminent and ntifiable hazard lic health or sa	I to afety?						
pro	Or do you own any property that needs mmediate attention?			If immediate attention is	s needed, why is it needed?			
peri: that	example, do you o shable goods, or l must be fed, or a needs urgent rep	ivestock building						
				Where is the property?	Number Street			
					City State ZIP Code			

Debtor 1

AUDRA

RENEE Middle Name ISRAEL

Case	number	(if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one:

☑ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	required	to to	receive	а	briefing	about
cred	it co	unselin	g b	ecause	of:		

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about
credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deploi		RENEE ISRAEL	Case number (if kno	Case number (# known)		
	First Name Mid	kile Name Last Name				
Pa	t 6: Answer These	Questions for Reporting P	urposes			
	What kind of debts do	16a. Are your debts p as "incurred by an i	orimarily consumer debts? Consumer deb ndividual primarily for a personal, family, or hou	ts are defined in 11 U.S.C. § 101(8) sehold purpose."		
	you have?	☐ No. Go to line 1 ☐ Yes. Go to line				
		16b. Are your debts money for a busine	orimarily business debts? Business debts ss or investment or through the operation of the	are debts that you incurred to obtain business or investment.		
		☐ No. Go to line 1☐ Yes. Go to line				
		16c. State the type of de	bbts you owe that are not consumer debts or bu	siness debts.		
	Are you filing under Chapter 7?	☐ No. I am not filing u	nder Chapter 7. Go to line 18.	entre en en en entre en		
	Do you estimate that any exempt property excluded and administrative expensare paid that funds wavailable for distribut to unsecured credito	is administrative of Ses ses ill be Yes tion	r Chapter 7. Do you estimate that after any exe expenses are paid that funds will be available to	mpt property is excluded and distribute to unsecured creditors?		
18.	How many creditors of you estimate that you owe?		☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000		
19.	How much do you estimate your assets be worth?	to \$0.\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	☐ \$500,000,001-\$1 billion ☐ \$1,000,000,001-\$10 billion ☐ \$10,000,000,001-\$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabiliti to be?	□ \$0-\$50,000 es □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	_	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Pa	rt 7: Sign Below	,				
Fo	or you	I have examined this pe	etition, and I declare under penalty of perjury tha	at the information provided is true and		
		If I have chosen to file of title 11, United States under Chapter 7.	under Chapter 7, I am aware that I may proceed s Code. I understand the relief available under e	I, if eligible, under Chapter 7, 11,12, or 13 each chapter, and I choose to proceed		
		If no attorney represent this document, I have o	s me and I did not pay or agree to pay someon btained and read the notice required by 11 U.S	e who is not an attorney to help me fill out .C. § 342(b).		
			dance with the chapter of title 11, United States			
		l understand making a with a bankruptcy case 18 U.S.C. §§ 152, 134	V . N . IN I	ng money or property by fraud in connection nent for up to 20 years, or both.		
		Signature of Debtor	Signatu	ure of Debtor 2		
		Executed on MM	4/2019 Execut	ed on		

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Debtor 1	AUDRA RENE		E ISRAEL	Case number (# known)_		
SCOIO! !	First Name	Middle Name	Last Name			
represer	attorney, if nted by one e not represe torney, you c	you are ented	I, the attorney for the debtor(s) name to proceed under Chapter 7, 11, 12 available under each chapter for when notice required by 11 U.S.C. § 2	ned in this petition, declare that I have info c, or 13 of title 11, United States Code, an hich the person is eligible. I also certify the 342(b) and, in a case in which § 707(b)(4 information in the schedules filed with the	ormed the debtor(s) about eligibility of have explained the relief nat I have delivered to the debtor(s) (D) applies, certify that I have no	
	file this page		×	Date	01/24/2019	
			Signature of Attorney for Debtor		MM / DD /YYYY	
			Printed name Firm name Number Street			
			City	State	ZIP Code	
			Contact phone	Email address	5	
			Bar number	State	_	

Debtor 1	AUDRA First Name	RENEE Middle Name	ISRAEL Last Name	Case number (# known)				
	if you are fili tcy without a	ng this	The law allows you, as a should understand tha themselves successfu	in individual, to represent yourself in bankruptcy court, but you t many people find it extremely difficult to represent lly. Because bankruptcy has long-term financial and legal e strongly urged to hire a qualified attorney.				
If you are represented by an attorney, you do not need to file this page.			To be successful, you mu technical, and a mistake of dismissed because you d hearing, or cooperate with firm if your case is selected	st correctly file and handle your bankruptcy case. The rules are very or inaction may affect your rights. For example, your case may be d not file a required document, pay a fee on time, attend a meeting or a the court, case trustee, U.S. trustee, bankruptcy administrator, or audit and for audit. If that happens, you could lose your right to file another stections, including the benefit of the automatic stay.				
			court. Even if you plan to in your schedules. If you property or properly claim also deny you a discharg case, such as destroying cases are randomly audit	perty and debts in the schedules that you are required to file with the pay a particular debt outside of your bankruptcy, you must list that debt do not list a debt, the debt may not be discharged. If you do not list it as exempt, you may not be able to keep the property. The judge can e of all your debts if you do something dishonest in your bankruptcy or hiding property, falsifying records, or lying. Individual bankruptcy ed to determine if debtors have been accurate, truthful, and complete.				
			If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.					
			consequences?	for bankruptcy is a serious action with long-term financial and legal				
			☑ No ☑ Yes					
			Are you aware that bank inaccurate or incomplete	ruptcy fraud is a serious crime and that if your bankruptcy forms are , you could be fined or imprisoned?				
			☐ No ☑ Yes					
			☐ No ☐ Yes Name of Person	Day someone who is not an attorney to help you fill out your bankruptcy forms? JUAWANA TELLIS by Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				
			have read and understoo	wledge that I understand the risks involved in filing without an attorney. I depend this notice, and I am aware that filing a bankruptcy case without an olose my rights of property if I do not properly handle the case. Signature of Debtor 2				
			Date 01/24/201 MM / DD / N	YYY MM / DD / YYYY				
			Contact phone 951-567-	1822 Contact phone				

ed 💎 kon slovensk fram fillige er om græmstigten av træftende et blev i skill frem fræmstærende i skæmer flem men flæm et montre fig pregigte for ærden

Cell phone

Email address ___

Cell phone

Email address _

Certificate Number: 15725-NV-CC-032188595



CERTIFICATE OF COUNSELING

I CERTIFY that on January 21, 2019, at 7:35 o'clock PM EST, Audra Israel received from 001 Debtorcc, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the District of Nevada, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

January 21, 2019 /s/Calvin Yim_ By: Date: Name: Calvin Yim Counselor

Title:

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapt	ter 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
+	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft.

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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Fill in this information to identify the case:						
Debtor 1	AUDRA RENEE I	AUDRA RENEE ISRAEL				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	DISTRICT OF NEVADA				
Case number			Chapter 7			

Official Form 119

Bankruptcy Petition Preparer's Notice, Declaration, and Signature

12/15

Bankruptcy petition preparers as defined in 11 U.S.C. § 110 must fill out this form every time they help prepare documents that are filed in the case. If more than one bankruptcy petition preparer helps with the documents, each must sign in Part 3. A bankruptcy petition preparer who does not comply with the provisions of title 11 of the United States Code and the Federal Rules of Bankruptcy Procedure may be fined, imprisoned, or both 11 U.S.C. § 110; 18 U.S.C. § 156.

Part 1:

Notice to Debtor

Bankruptcy petition preparers must give the debtor a copy of this form and have the debtor sign it before they prepare any documents for filing or accept any compensation. A signed copy of this form must be filed with any document prepared.

Bankruptcy petition preparers are not attorneys and may not practice law or give you legal advice, including the following:

- whether to file a petition under the Bankruptcy Code (11 U.S.C. § 101 et seq.);
- whether filing a case under chapter 7, 11, 12, or 13 is appropriate;
- whether your debts will be eliminated or discharged in a case under the Bankruptcy Code;
- whether you will be able to retain your home, car, or other property after commencing a case under the Bankruptcy Code;
- what tax consequences may arise because a case is filed under the Bankruptcy Code;
- whether any tax claims may be discharged;
- whether you may or should promise to repay debts to a creditor or enter into a reaffirmation agreement;
- how to characterize the nature of your interests in property or your debts; or
- what procedures and rights apply in a bankruptcy case.

The bankruptcy petition preparer JUAWANA TELLIS	has notified me of any maximum allowable fee before preparing any
document for filing or accepting any fee.	
X localling office	Date January 24, 2019
Signature of Deptor 1 acknowledging receipt of this notice	MM/DD /YYYY

Case 19-10409-abl Doc 1 Entered 01/25/19 14:49:41 Page 15 of 60 Debtor 1 **AUDRA RENEE ISRAEL** Case number (if known) Part 2: Declaration and Signature of the Bankruptcy Petition Preparer Under penalty of perjury, I declare that: I am a bankruptcy petition preparer or the officer, principal, responsible person, or partner of a bankruptcy petition preparer; I or my firm prepared the documents listed below and gave the debtor a copy of them and the Notice to Debtor by Bankruptcy Petition Preparer as required by 11 U.S.C. §§ 110(b), 110(h), and 342(b); and if rules or guidelines are established according to 11 U.S.C. § 110(h) setting a maximum fee for services that bankruptcy petition preparers may charge, I or my firm notified the debtor of the maximum amount before preparing any document for filling or before accepting any fee from the debtor. **JUAWANA TELLIS** Printed name Title, if any Firm name, if it applies 5135 CAMINO AL NORTE STE 267 702-265-8084 NORTH LAS VEGAS, NEVADA 89031 Number, Street, City, State & ZIP Code Contact phone I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I check: (Check all that apply.) V Voluntary Petition (Form 101) Schedule I (Form 106I) Chapter 11 Statement of Your Current Monthly Income (Form 122B) Statement About Your Social Security Numbers Schedule J (Form 106J) (Form 121) Chapter 13 Statement of Your Current Monthly V Declaration About an Individual Debtor's Schedules Income and Calculation of Commitment Period Your Assets and Liabilities and Certain Statistical (Form 106Dec) (Form 122C-1) Information (Form 106Sum) Statement of Financial Affairs (Form 107) Chapter 13 Calculation of Your Disposable Income Schedule A/B (Form 106A/B) Statement of Intention for Individuals Filing Under (Form 122C-2) Schedule C (Form 106C) Chapter 7 (Form 108) V Application to Pay Filing Fee in Installments (Form Chapter 7 Statement of Your Current Monthly Schedule D (Form 106D) Income (Form 122A-1) Schedule E/F (Form 106E/F) Application to Have Chapter 7 Filing Fee Waived (Form 103B) Statement of Exemption from Presumption of Schedule G (Form 106G) Abuse under § 707(b)(2) (Form 122A-1Supp) A list of names and addresses of all creditors Schedule H (Form 106H) (creditor or mailing matrix) ✓ Chapter 7 Means Test Calculation (Form 122A-2) FORMS 119 & 2800 ✓ Other Bankruptcy petition preparers must sign and give their Social Security numbers. If more than one bankruptcy petition preparer prepared the documents to which this declaration applies, the signature and Social Security number of each preparer must be provided. 11 U.S.C. § 110. 530-60-5721 Date January 24, 2019 Signature of pankruptcy petition preparer of officer, principal, Social Security number of person who signed MM/DD/YYYY responsible person, or partner JUAWAŅÁ TELLIS Printed name Date January 24, 2019

Official Form 119

Printed name

Social Security number of person who signed

Signature of bankruptcy petition preparer or officer, principal,

responsible person, or partner

MM/DD/YYYY

B2800 (Form 2800) (12/15)

United States Bankruptcy Court District of Nevada

In re	AUDRA RENEE ISRAEL		Case No.	
•		Debtor(s)	Chapter	7
	DISCLOSURE OF COMI	PENSATION OF BANKRUPTCY if a bankruptcy petition preparer prepares the p	Y PETITIO petition. 11 U.S.	N PREPARER .C.§110(h)(2).]
1.	prepared or caused to be prepared on bankruptcy case, and that compensat	under penalty of perjury that I am not an atternorm documents for filing by the above ion paid to me within one year before the fon behalf of the debtor(s) in contemplation	e-named debto liing of the bar	or(s) in connection with this alkruptcy petition, or agreed to
	For document preparation services I h	nave agreed to accept	\$	200.00
	Prior to the filing of this statement I h	nave received	\$	200.00
	Balance Due		\$	0.00
2.	I have prepared or caused to be prepared	ared the following documents (itemize):		
3.	and provided the following services of the source of the compensation paid			
	✓ Debtor ☐ Other (specify)			
4.	The source of compensation to be pa			
5.	The foregoing is a complete statement filed by the debtor(s) in this bankrup	nt of any agreement or arrangement for pay tcy case.	yment to me fo	r preparation of the petition
6. NAME	To my knowledge no other person had case except as listed below:	as prepared for compensation a document for social security number	for filing in cor	nnection with this bankruptcy
	A ALY	530-60-5721		January 24, 2019
	Signature	Social Security number of bankruptcy petition preparer*	-	Date
	ANA TELLIS	5135 CAMINO AL NORTE STE 267 NORTH LAS VEGAS, NEVADA 89031		
	name and title, if any, of ptcy Petition Preparer	Address		

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

^{*}If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer. (Required by 11 U.S.C. § 110.)

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Fill i	n this information to identify your case:		
Debt			
Bobi	First Name Middle Name Last Name		
Debt (Spour	or 2 Se if, filing) First Name Middle Name Last Name		
Unite	ed States Bankruptcy Court for the: DISTRICT OF NEVADA		
Case (if kno	e number	☐ Check if amende	this is an d filing
Off	icial Form 106Sum		
Sur	nmary of Your Assets and Liabilities and Certain Statistical Information		2/15 correct
infor	s complete and accurate as possible. If two married people are filing together, both are equally responsible for mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amendo original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	ed schedule	s after you file
Part	1: Summarize Your Assets		
		Your as: Value of	sets what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	28,801.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	28,801.00
Par	2: Summarize Your Liabilities		***************************************
		Your lia Amount	bilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	30,308.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	54,797.13
	Your total liabilities	\$	85,105.13
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,108.33
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,779.75
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	r a personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check the court with your other schedules.	is box and s	ubmit this form to

Official Form 106Sum

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8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0,00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	3,490.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	3,490.00

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Debtor	1	AUDRA RENEE ISF	RAEL		
		First Name	Middle Name Last Name		
Debtor	2 if filing)	First Name	Middle Name Last Name		
Jnited	States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA		
Case r	number _				☐ Check if this is an amended filing
		- A-1			2.11(3.1,22.29
م م	ial Ea	www. 4.06.A./D			
		orm 106A/B	4		
		e A/B: Prope			12/15
hink it i nforma	fite heet F	Be as complete and accurate re space is needed, attach a	tems. List an asset only once. If an asset fits in more than or as possible. If two married people are filing together, both ar separate sheet to this form. On the top of any additional page	e equally responsible for su	pplying correct
art 1:	Describe	Each Residence, Building,	and, or Other Real Estate You Own or Have an Interest In		
. Do y	ou own or	have any legal or equitable i	nterest in any residence, building, land, or similar property?		
■ N	o. Go to Pa	art 2.			
_		is the property?			
-	_	. , ,			
		Your Vehicles			
omeo	own, lea	nse, or have legal or equivives. If you lease a vehicle	table interest in any vehicles, whether they are registe also report it on Schedule G: Executory Contracts and U. ity vehicles, motorcycles	red or not? Include any vonexpired Leases.	ehicles you own that
o you	own, leane else driss, vans, to	nse, or have legal or equivives. If you lease a vehicle	, also report it on Schedule G: Executory Contracts and U.	red or not? Include any ve nexpired Leases.	ehicles you own that
Do you comeo B. Car	own, leane else driss, vans, to	ise, or have legal or equi ives. If you lease a vehicle rucks, tractors, sport util	, also report it on Schedule G: Executory Contracts and U.	nexpired Leases. Do not deduct secured cl the amount of any secure	aims or exemptions. Put ed claims on <i>Schedule D:</i>
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Do you someo B. Car D N	y own, leane else dri s, vans, tr lo es Make: Model: Year:	ise, or have legal or equives. If you lease a vehicle rucks, tractors, sport util KIA OPTIMA 2015 ale mileage: 760	who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clai Current value of the	aims or exemptions. Put ed claims on <i>Schedule D:</i> ms Secured by Property. Current value of the
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Oo you someon. Car N Y 3.1	Make: Model: Year: Model: Year: Model: Year: Model: Year: Model: Year:	ise, or have legal or equives. If you lease a vehicle rucks, tractors, sport util KIA OPTIMA 2015 ale mileage: 760 rmation: JEEP RENEGADE	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$8,206.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Creditors Who Have Clair Creditors Who Have Clair Canada Cana	aims or exemptions. Put ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$8,206.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
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Do you someon. Car N Y 3.1	Make: Model: Year: Approximation	KIA OPTIMA 2015 ale mileage: 760 rmation: JEEP RENEGADE 2017 ale mileage: 250	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$8,206.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$8,206.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
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☐ Yes

Best Case Bankruptcy

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De	ebtor 1	AUDRA RENI	E ISRAEL	Case number (if know	n)
5	Add the	e dollar value of t	he portion you own for all of your entri	es from Part 2, including any entries for =>	\$22,606.00
			al and Household Items gal or equitable interest in any of the fo	llowing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Example No —	oold goods and fulles: Major appliance Describe	rnishings es, furniture, linens, china, kitchenware		dame of exemptions.
			MISC HOUSEHOLD FURNITURE		\$2,200.00
7.	□ No	les: Televisions ar	d radios; audio, video, stereo, and digital phones, cameras, media players, games	equipment; computers, printers, scanners; musi	
			2 TV 2 CELLPHONE		\$300.00
	Examp ■ No □ Yes	other collection	ns, memorabilia, collectibles	k; books, pictures, or other art objects; stamp, o	oin, or baseball card collections;
9.	Examp ■ No	nent for sports ar oles: Sports, photo musical instru :. Describe	graphic, exercise, and other hobby equipn	nent; bicycles, pool tables, golf clubs, skis; cano	es and kayaks; carpentry tools;
10	■ No	rms nples: Pistols, rifles s. Describe	, shotguns, ammunition, and related equi	oment	
11	□ No	es nples: Everyday clos. s. Describe	othes, furs, leather coats, designer wear, s	hoes, accessories	
			PERSONAL CLOTHING		\$500.00
12	■ No	Iry nples: Everyday je s. Describe	welry, costume jewelry, engagement rings	, wedding rings, heirloom jewelry, watches, gen	ns, gold, silver
13	Exan ■ No	farm animals nples: Dogs, cats, s. Describe	birds, horses		
14	4. Any 0			list, including any health aids you did not lis	t

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Debtor	1 AUDRA RENEE ISRAE	-	Case num	nber (if known)
	dd the dollar value of all of you r Part 3. Write that number here		3, including any entries for pages you have	attached \$3,000.00
Part 4:	Describe Your Financial Assets			
	u own or have any legal or equi	able interest in a	ny of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	amples: Money you have in your		e, in a safe deposit box, and on hand when you	file your petition
			Cash	ı \$10.
17. De r <i>Ex</i>	institutions. If you have r		nts; certificates of deposit; shares in credit unions ith the same institution, list each.	ns, brokerage houses, and other similar
	es		Institution name:	
	17.1. C	HECKING	NAVY FEDERAL CREDIT UNION	\$160.
	17.2. C	HECKING	WELLS FARGO BANK	\$25.
Ex ■ N	lo .	raded stocks accounts with brok titution or issuer na	erage firms, money market accounts	
	int venture	erests in incorpor	ated and unincorporated businesses, includi	ing an interest in an LLC, partnership, a
	es. Give specific information abo	out them of entity:	 % of owr	nership:
Ne	egotiable instruments include pers on-negotiable instruments are tho	onal checks, cash	able and non-negotiable instruments ers' checks, promissory notes, and money order after to someone by signing or delivering them.	rs.
	es. Give specific information abo Issuer			
21. Re t <i>Ex</i> □ N		Keogh, 401(k), 40	B(b), thrift savings accounts, or other pension or	profit-sharing plans
■ Y	es. List each account separately/ Type of a		Institution name:	
	401K		ASURION	\$3,000
Yo	curity deposits and prepaymen	ou have made so t	nat you may continue service or use from a comp blic utilities (electric, gas, water), telecommunica	npany sations companies, or others
<i>E.</i> X		us, prepaid tent, p	ibilo dillilles (electric, gas, water), telecommunica	ations companies, or others
	· -		Institution name or individual:	

Yes. Institution name or individual

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De	btor 1	AUDRA R	ENEE ISRAEL			Case number (If known)	
23.		es (A contrac	t for a periodic payme	nt of money to you, either for	life or for a number of	years)	
	■ No □ Yes		Issuer name and des	cription.			
24.			ation IRA, in an acco 1), 529A(b), and 529(b	unt in a qualified ABLE pro)(1).	gram, or under a qua	alified state tuition progran	n.
	■ No □ Yes		Institution name and	description. Separately file th	ne records of any intere	ests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	equitable or	future interests in p	roperty (other than anythin	g listed in line 1), and	d rights or powers exercisa	able for your benefit
		Give specific	information about the	m			
26.	Patents Example ■ No	s, copyrights les: Internet o	s, trademarks, trade s domain names, websit	ecrets, and other intellectures, proceeds from royalties a	al property and licensing agreemer	nts	
		Give specific	information about the	m			
27.	_Examp	es, franchise les: Building	es, and other general permits, exclusive lice	intangibles nses, cooperative associatio	n holdings, liquor licen	ses, professional licenses	
	■ No □ Yes.	Give specific	information about the	m			
M	oney or p	property ow	ed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28		unds owed	to you				
	■ No □ Yes.	Give specific	information about the	m, including whether you alre	eady filed the returns a	nd the tax years	
29	. Family Examp ■ No	support bles: Past due	e or lump sum alimony	, spousal support, child supp	ort, maintenance, divo	rce settlement, property sett	lement
	☐ Yes.	Give specific	information				
30	Examp	oles: Unpaid v	neone owes you wages, disability insur ; unpaid loans you ma	ance payments, disability ber de to someone else	nefits, sick pay, vacatio	on pay, workers' compensat	ion, Social Security
	■ No □ Yes.	Give specific	c information				
31	. Interes Examp	sts in insurai ples: Health,	nce policies disability, or life insura	nce; health savings account	(HSA); credit, homeow	ner's, or renter's insurance	
		Name the in	surance company of e Company na	ach policy and list its value. nme:	Beneficia	ary:	Surrender or refund value:
32	If you	terest in pro are the bene one has died.	ficiary of a living trust,	from someone who has di expect proceeds from a life i	ed nsurance policy, or are	currently entitled to receive	property because
	■ No □ Yes.	Give specifi	c information				
33	3 Claims	s against thi	rd parties, whether o	r not you have filed a laws	uit or made a demand	d for payment	
	Exam _l ■ No	ples: Accider	nts, employment dispu	es, insurance claims, or righ	ts to sue		
		Describe ea	ach claim				

Official Form 106A/B Schedule A/B: Property page 4

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Deb	or 1 AUDRA RENEE ISRAEL		Case number (if known)	
34. C	ther contingent and unliquidated claims of every nature, inclu	ıding counterclaims o	of the debtor and rights to set off	claims
	No			
	Yes. Describe each claim			
35. <i>I</i>	ny financial assets you did not already list			
_	No			
	Yes. Give specific information			
00	A 4446 - 4-Hannahar - 5-Hafaran antica form Double in challen		as you have attached	
36.	Add the dollar value of all of your entries from Part 4, includin for Part 4. Write that number here			\$3,195.00
Part	Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real esta	ite in Part 1.	
37. D	you own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
	_			
Part	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	I Own or Have an Interes	st In.	
46 I	o you own or have any legal or equitable interest in any farm-	or commercial fishing	ng-related property?	
	No. Go to Part 7.	o, commission nom	.g .o.a.caa proporty.	
	☐ Yes. Go to line 47.			
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Part	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
E2 I	o you have other property of any kind you did not already list	2		
	o you have other property of any kind you did not already list. Examples: Season tickets, country club membership	. f		
	No			
	Yes. Give specific information			
5 4	Add the dellawingling of all of your optring from Dayt 7. Write th	ast number here	MARINE CO. 17.17.17.17.17.17.17.17.17.17.17.17.17.1	\$0.00
54.	Add the dollar value of all of your entries from Part 7. Write th	iat number nere		\$0.00
Part	List the Totals of Each Part of this Form			
				\$0.00
	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$22,606.00		
57. 58.	Part 3: Total personal and household items, line 15 Part 4: Total financial assets, line 36	\$3,000.00 \$3,195.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$28,801.00	Copy personal property total	\$28,801.00
V2.	Total personal property, riad miles de unedgir e m.	+20,001.00		
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$28,801.00

page 5 Official Form 106A/B Schedule A/B: Property Best Case Bankruptcy

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ill in this infor	mation to identify your	case:		
Debtor 1	AUDRA RENEE IS		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEVADA		
Case number (if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming	? Check one only, ever	ı if yo	ur spouse is filing with you.	
	You are claiming state and federal nonban	nkruptcy exemptions.	11 U.S	.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	2015 KIA OPTIMA 76000 miles	\$8,206.00		\$0.00	Nev. Rev. Stat. § 21.090(1)(f)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2017 JEEP RENEGADE 25000 miles	\$14,400.00		\$0.00	Nev. Rev. Stat. § 21.090(1)(f)
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
_	MISC HOUSEHOLD FURNITURE	\$2,200.00		\$2,200.00	Nev. Rev. Stat. § 21.090(1)(b)
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(b)
	2 TV 2 CELLPHONE	\$300.00		\$300.00	Nev. Rev. Stat. § 21.090(1)(b)
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(f) Nev. Rev. Stat. § 21.090(1)(f) Nev. Rev. Stat. § 21.090(1)(b)
	PERSONAL CLOTHING	\$500.00		\$500.00	Nev. Rev. Stat. § 21.090(1)(b)
	Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	

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Debtor	1 AUDRA RENEE ISRAEL			Case number (if known)	
	rief description of the property and line on Chedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
_	ash ne from <i>Schedule A/B</i> : 16.1	\$10.00		\$10.00	Nev. Rev. Stat. § 21.090(1)(z)
	non conceance / v.B. 1011			100% of fair market value, up to any applicable statutory limit	
_	HECKING: NAVY FEDERAL CREDIT	\$160.00		\$160.00	Nev. Rev. Stat. § 21.090(1)(z)
_	ine from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
_	CHECKING: WELLS FARGO BANK	\$25.00	\$25.00 \$	\$25.00	Nev. Rev. Stat. § 21.090(1)(z)
LI	ne from <i>Schedule A/B</i> ; 17.2			100% of fair market value, up to any applicable statutory limit	
•	01K: ASURION ne from Schedule A/B: 21.1	\$3,000.00		\$3,000.00	Nev. Rev. Stat. § 21.090(1)(r)
LI	ne Irom Schedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	
3. A (S	re you claiming a homestead exemption of Subject to adjustment on 4/01/19 and every S No Yes. Did you acquire the property covere No Yes	3 years after that for ca	ases fi		

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Fill in this informa	ation to identify your		710 14.40.41		
Debtor 1	AUDRA RENEE I	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
	kruptcy Court for the:	DISTRICT OF NEVADA			
	,				
Case number (if known)				☐ Check	f this is an
				amendo	ed filing
Official Form	106D				
		Who Have Claims Secure	d by Property	v	12/15
Be as complete and is needed, copy the number (if known).	accurate as possible. If Additional Page, fill it o	f two married people are filing together, both are edut, number the entries, and attach it to this form. C	on the top of any addition	pplying correct informat nal pages, write your nar	ne and case
	have claims secured by				
☐ No. Check	this box and submit th	is form to the court with your other schedules. Y	ou have nothing else to	o report on this form.	
■ Yes. Fill in	all of the information b	pelow.			
	Secured Claims		Column A	Column B	Column C
for each claim. If mo	ore than one creditor has	nore than one secured claim, list the creditor separatel a particular claim, list the other creditors in Part 2. As al order according to the creditor's name.	y Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1 CHRYSLE	R CAPITAL	Describe the property that secures the claim:	value of collateral. \$19,062.00	claim \$14,400.00	If any \$4,662.00
Creditor's Name		2017 JEEP RENEGADE 25000 miles			
P.O. BOX	9612 <i>4</i> 5	As of the date you file, the claim is: Check all that			
	1, TX 76161	apply. Contingent			
Number, Street,	City, State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the de	bt? Check one.	Nature of lien. Check all that apply. An agreement you made (such as mortgage or set)	ecured		
■ Debtor 1 only □ Debtor 2 only		car loan)	504,04		
Debtor 1 and De	obtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	ne debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this cla		Other (including a right to offset)	Money Security		
community de	bt				
Date debt was incu	urred 09/08/2017	Last 4 digits of account number 2917			
2.2 EXETER F	FINANCE, LLC	Describe the property that secures the claim:	\$11,246.00	\$8,206.00	\$3,040.00
Creditor's Name		2015 KIA OPTIMA 76000 miles			
D 0 D0V	400007	As of the date you file, the claim is: Check all that			
P.O. BOX Irving, TX		apply. □ Contingent			
	, City, State & Zip Code	☐ Unliquidated			
radifiber, Garcer,	, only, onate a zip soci	☐ Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only		An agreement you made (such as mortgage or s	ecured		
Debtor 2 only		car loan)			
Debtor 1 and De	•	Statutory lien (such as tax lien, mechanic's lien)			
	he debtors and another	Judgment lien from a lawsuit	Money Security		
☐ Check if this cl community de		Other (including a right to offset) Purchase	Money Security		
Date debt was inc	urred	Last 4 digits of account number 4944			

Official Form 106D

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Debtor 1 AUDRA REN	IEE ISRAEL		Case number (if known)	
First Name	Middle Name	Last Name		
Add the dollar value of yo	our entries in Column A on	this page. Write that number here:	\$30,308.00	
	your form, add the dollar va		\$30,308.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	0030 10 10-0	oo abi bo	o i Littoi	CG 01/20/13	14.40.41		
Fill in th	nis information to identify your	case:					
Debtor 1	1 AUDRA RENEE IS	SRAFI					
Deptoi	First Name	Middle Name		Last Name			
Debtor 2 (Spouse if		Middle Name	!	Last Name			
United 9	States Bankruptcy Court for the:	DISTRICT OF	NEVADA				
Case nu (if known)						_	eck if this is an ended filing
Officia	al Form 106E/F						
Sche	dule E/F: Creditors W	/ho Have U	nsecured	Claims			12/15
any exec Schedule Schedule left. Attac	mplete and accurate as possible. Us utory contracts or unexpired leases e G: Executory Contracts and Unexp e D: Creditors Who Have Claims Sec ch the Continuation Page to this page d case number (if known).	that could result bired Leases (Offic cured by Property. ge. If you have no	in a claim. Also i lal Form 106G). I If more space is information to re	o not include any cro	editors with partially	secured claims t	hat are listed in les in the boxes on the
Part 1:							
	any creditors have priority unsecure	ed claims against	you?				
	No. Go to Part 2.						
	Yes.						
	List All of Your NONPRIORI						
3. Do	any creditors have nonpriority unse	cured claims agai	nst you?				
	No. You have nothing to report in this	part. Submit this for	m to the court with	your other schedules.			
	Yes.						
	t all of your nonpriority unsecured of secured claim, list the creditor separate n one creditor holds a particular claim, t 2.						Continuation Page of
							Total claim
4.1	ACIMA CREDIT	L	ast 4 digits of acc	count number			\$800.00
	Nonpriority Creditor's Name 9815 S MONROE ST 4TH F	LOOR V	Vhen was the deb	t incurred?			
	Number Street City State Zip Code		s of the date you	file, the claim is: Che	eck all that apply		
	Who incurred the debt? Check one						
	Debtor 1 only		Contingent				
	Debtor 2 only		Unliquidated				
	Debtor 1 and Debtor 2 only	_	Disputed	RITY unsecured clair	n:		
	At least one of the debtors and a	110(116)	ype of NoNFRIO ☐ Student loans				
	☐ Check if this claim is for a cordebt	nmunitv		ing out of a separation	agreement or divorce	that you did not	
	Is the claim subject to offset?	r	eport as priority cla	aims			
	■ No	I	Debts to pensio	n or profit-sharing plar	ns, and other similar de	ebts	
	□Yes	ĺ	Other Specify	COLLECTION			
	hand 100		Cinor, Opcomy				

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Debtor	1 AUDRA RENEE ISRAEL	Case number (if known)	
4.2	BIG PICTURE LOANS	Last 4 digits of account number	\$1,200.00
	Nonpriority Creditor's Name 521 S MAIN ST FINLAY Findlay, OH 45840	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other, Specify COLLECTION	
4.3	CAPITAL ON E BANK USA NA	Last 4 digits of account number 2917	\$487.00
	Nonpriority Creditor's Name P.O. BOX 961245	When was the debt incurred? 09/08/2017	
	Fort Worth, TX 76161 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
		☐ Unliquidated	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify COLLECTION	
4.4	CAPITAL ONE	Last 4 digits of account number 2320	\$2,406.00
	Nonpriority Creditor's Name CAPITAL ONE P.O. BOX 30253	When was the debt incurred? 03/21/2017	
	Salt Lake City, UT 84130-0253 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify COLLECTION	
		— Onion Opeony	

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Debtor	1 AUDRA RENEE ISRAEL	Case number (if known)				
4.5	CARMAX AUTO FINANCE Nonpriority Creditor's Name	Last 4 digits of account number	\$16,133.00			
	CARMAX AUTO FINANCE P.O. BOX 440609	When was the debt incurred? 09/13/2014				
	Kennesaw, GA 30160 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
	■ No					
	Yes	■ Other. Specify COLLECTION / Repo				
4.6	CASH FACTORY USA Nonpriority Creditor's Name	Last 4 digits of account number	\$500.00			
	CASH FACTORY USA 6965 S RAINBOW BLVD STE 130 Las Vegas, NV 89118	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify COLLECTION				
4.7	CENTENNIAL HILLS HOSPITAL	Last 4 digits of account number 0572	\$3,400.00			
•	Nonpriority Creditor's Name CENTENNIAL HILLS HOSPITAL P.O. BOX 31001-0827	When was the debt incurred?				
	Pasadena, CA 91110-0827 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other, Specify MEDICAL BILL				

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Debtor	1_AUDRA RENEE ISRAEL	Case number (if known)	
4.8	DESERT RADIOLOGY SOLUTIONS LLC Nonpriority Creditor's Name DESERT RADIOLOGY SOLUTIONS LLC	Last 4 digits of account number 9779 When was the debt incurred?	\$109.00
	P.O. BOX 1645 Indianapolis, IN 46206 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify MEDICAL BILL	
4.9	FINGERHUT/WEBBANK	Last 4 digits of account number 1980	\$2,258.00
	Nonpriority Creditor's Name 6250 RIDGEWOOD RD Saint Cloud, MN 56303-0820	When was the debt incurred? 01/20/2012	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profil-sharing plans, and other similar debts	
	Yes	Other. Specify COLLECTION	
4.1	GALAXY INTERNATIONAL PURCHASING LLC	Last 4 digits of account number 2645	\$3,195.13
· · · · · · · · · · · · · · · · · · ·	Nonpriority Creditor's Name 4730 SOUTH FORT APACHE ROAD	When was the debt incurred?	
	Las Vegas, NV 89147 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7,6 3, 4,6 4,6 4,6 4,6 4,6 4,6 4,6 4,6 4,6 4,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	■ Olher. Specify COLLECTION	

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Debtor	1 AUDRA RENEE ISRAEL		Case number (if known)	
4.1	KOHLS/CAPONE	Last 4 digits of account number	5065	\$1,087.00
	Nonpriority Creditor's Name KOHLS/CAPONE P.O. BOX 3115	When was the debt incurred?	05/01/2014	
	Milwaukee, WI 53201 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify COLLECTI	ON	
4.1	MAB&T RETAIL	Last 4 digits of account number	0063	\$3,292.00
	Nonpriority Creditor's Name P.O.BOX 4499	When was the debt incurred?	04/08/2014	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify COLLECT	ON	
4.1	MARINELLO SCHOOLS OF BEAUTY	Last 4 digits of account number	3234	\$1,440.00
	Nonpriority Creditor's Name 5001 E BONANZA STE 110 Las Vegas, NV 89110	When was the debt incurred?	04/19/2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecur	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans	and the second s	
	debt Is the claim subject to offset?	report as priority claims	paration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shar		
	Yes	■ Other. Specify COLLECT	ION	

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Debtor	1 AUDRA RENEE ISRAEL	Case number (if known)	
4.1 4	MOBILOANS, LLC	Last 4 digits of account number 3426	\$1,100.00
	Nonpriority Creditor's Name P.O. BOX 42917	When was the debt incurred? 06/28/2018	
	Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify COLLECTION	
4.1	MOUNTAIN SUMMIT FINANCIAL	Last 4 digits of account number	\$900.00
	Nonpriority Creditor's Name 635 EAST HWY #20 F	When was the debt incurred?	
	Upper Lake, CA 95485 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
		☐ Unliquidated	
	Debtor 2 only	·	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify COLLECTION	
4.1	MOUNTAINVIEW HOSPITAL	Last 4 digits of account number	\$4,600.00
	Nonpriority Creditor's Name MOUNTAINVIEW HOSPITAL PO BOX 740766	When was the debt incurred?	
	Cincinnati, OH 45274 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify MEDICAL BILL	
	∟ res	Other, Specify WILDIOAL BILL	

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Debto	r 1 AUDRA RENEE ISRAEL	Case number (if known)	
4.1	PROGRESSIVE INSURANCE	Last 4 digits of account number	\$1,500.00
	Nonpriority Creditor's Name 6300 WILSON MILLS ROAD Cleveland, OH 44143	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other, Specify COLLECTION	
4.1	RAPID CASH	Last 4 digits of account number	\$2,000.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	RAPID CASH 5676 S EASTERN AVE	When was the dept incurred?	
	Las Vegas, NV 89119		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify COLLECTION	
4.1 9	SHADOW EMERGENCY PHYSICIANS Nonpriority Creditor's Name	Last 4 digits of account number 7360	\$1,888.00
	P.O. 390915	When was the debt incurred?	
	Minneapolis, MN 55479	The state of the s	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	п	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		Debts to pension or profit-sharing plans, and other similar debts	
		Other Specific MEDICAL BILL	
	Is the claim subject to offset? ■ No □ Yes	report as priority claims	

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Nonpriority Creditor's Name P.O. BOX 26561 Salt Lake City, UT 84126 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 is for a community debt Is the claim subject to offset? No Debtor 1 she claim subject to offset? No Debtor 2 only Colligations arising out of a separation agreement or divorce that you did not report as priority claims No Debtor SyncB/OLD NAVY Nonpriority Creditor's Name SYNCB/OLD NAVY P.O. BOX 965005 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Conlingent Older Green When was the debt incurred? Older Green	\$800.00
Nonpriority Creditor's Name P.O. BOX 26561 Salt Lake City, UT 84126 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only Contingent Unliquidated Debtor 2 only Unliquidated Debtor 3 and Debtor 2 only Unliquidated Debtor 4 is the claim signer of the debtors and another Student loans Objigations arising out of a separation agreement or divorce that you did not report as priority claims Debtor 5 is the claim subject to offset? Debtor 1 only Disputed Disputed Disputed Debtor 1 only Debtor 1 only Disputed Disputed Disputed Debtor 1 only Debtor 1 only Disputed Disputed Disputed Debtor 1 only Disputed Disputed Disputed Debtor 1 only Disputed Disputed Debtor 1 only Debtor 1 only Disputed Debtor 1 only	\$600.00
P. O. BÓX 26561 Salt Lake City, UT 84126 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Student loans Debtor 1 st claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts SYNCB/OLD NAVY Nonpriority Creditor's Name SYNCB/OLD NAVY P. O. BOX 965005 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Childrations arising out of a separation agreement or divorce that you did not report as priority claims COLLECTION COLLECTION When was the debt incurred? 04/20/2014 As of the date you file, the claim is: Check all that apply When was the debt incurred? O4/20/2014 As of the date you file, the claim is: Check all that apply Unliquidated Debtor 1 only Debtor 1 and Debtor 2 only Disputed	
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only De	
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ Type of NONPRIORITY unsecured claim: □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Debtor 2 only □ Debtor 1 only □ Contingent □ Debtor 2 only □ Disputed □ Disputed □ Disputed □ Oliquidated □ Disputed □ DisputeDisputeDisputeDisputeDisputeDisputeDisputeDisputeDisputeDisputeDispu	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify □ Other. Specify □ Other. Specify □ Other. Specify □ COLLECTION □ OSO □ Nonpriority Creditor's Name SYNCB/OLD NAVY P.O. BOX 965005 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Disputed Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debtor 1 only □ Other. Specify □ COLLECTION □ O50 □ New was the debt incurred? □ O4/20/2014 □ Contingent □ Debtor 1 and Debtor 2 only □ Disputed	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify □ Other. Specif	
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify □ Other. Specif	
At least one of the debtors and another Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify COLLECTION SYNCB/OLD NAVY Last 4 digits of account number SYNCB/OLD NAVY P.O. BOX 965005 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Contingent Debtor 2 only Debtor 2 only Disputed Disputed Disputed Disputed Disputed Debtor 2 only Disputed Disputed Debtor 2 only Disputed Debtor 2 only Debtor 2 only Disputed Debtor 2 only Debtor 2 only Debtor 2 only Disputed Debtor 2 only Debtor 2 only Disputed Debtor 2 only Disputed Debtor 2 only D	
☐ Check if this claim is for a community debt ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify COLLECTION SYNCB/OLD NAVY P.O. BOX 965005 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed As of the date you file, the claim is: Check all that apply Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Obligations arising claims ☐ Obligations aris	
debt Is the claim subject to offset? No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Olher. Specify □ COLLECTION □ Oso □ Other. Specify □ COLLECTION □ Oso	
□ Yes □ Other. Specify COLLECTION SYNCB/OLD NAVY Last 4 digits of account number 0050 Nonpriority Creditor's Name SYNCB/OLD NAVY P.O. BOX 965005 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Contingent □ Unliquidated □ Debtor 2 only □ Disputed	
SYNCB/OLD NAVY Last 4 digits of account number 0050 Nonpriority Creditor's Name SYNCB/OLD NAVY P.O. BOX 965005 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed COLLECTION Last 4 digits of account number 0050 When was the debt incurred? 04/20/2014 As of the date you file, the claim is: Check all that apply Unliquidated Disputed	
Nonpriority Creditor's Name SYNCB/OLD NAVY P.O. BOX 965005 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed Last 4 digits of account number 0030 When was the debt incurred? 04/20/2014 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed	
Nonpriority Creditor's Name SYNCB/OLD NAVY P.O. BOX 965005 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed When was the debt incurred? 04/20/2014 As of the date you file, the claim is: Check all that apply Unliquidated Disputed	\$440.00
P.O. BOX 965005 Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Disputed As of the date you file, the claim is: Check all that apply Unliquidated Disputed	
Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 2 only □ Disputed	
Who incurred the debt? Check one. □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed	
■ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed	
☐ Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ■ Other. Specify COLLECTION	
UMC Last 4 digits of account number 5203	\$800.00
Nonpriority Creditor's Name	
UMC When was the debt incurred? 10/1/2018 1800 WEST CHARLESTON AVE	
Las Vegas, NV 89102 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	
■ Debtor 1 only □ Contingent	
☐ Debtor 2 only ☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	
— 140	
☐ Yes ■ Other. Specify MEDICAL BILL	

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Debto	r 1 AUDRA RENEE ISRAEL		Case number (if known)		
4.2 3	US BANK	Last 4 digits of account number	9994	\$972.00	
	Nonpriority Creditor's Name CRA MANAGEMENT P.O. BOX 3447	When was the debt incurred?	05/02/2014		
	Oshkosh, WI 54903 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe propert as priority claims	aration agreement or divorce that you did not		
	No	Debts to pension or profit-shari	ng plans, and other similar debts		
	☐ Yes	■ Other, Specify COLLECTI			
4.2	US DEPT OF EDUCATION/GLE	Last 4 digits of account number	9679	\$3,490.00	
4	Nonpriority Creditor's Name 2401 INTERNANTIONAL P.O. BOX 7859	When was the debt incurred?	04/08/2012		
	Madison, WI 53704 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts		
	Yes	Other. Specify			
	STUDENT LOAN				
Part	List Others to Be Notified About a D	ebt That You Already Listed			
is tr hav	this page only if you have others to be notified ying to collect from you for a debt you owe to e more than one creditor for any of the debts the fied for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor i nat you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then list the collection agency	nere. Similarly, if you	
	and Address	On which entry in Part 1 or Part 2 did you Line 4.22 of (Check one):	ulist the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claim	ns	
8668	GON AGENCY INC S SPRING MOUINTAIN ROAD	•	Part 2: Creditors with Nonpriority Unsecured C	laims	
Las Vegas, NV 89117		Last 4 digits of account number			
	and Address	On which entry in Part 1 or Part 2 did you Line 4.13 of (Check one):	u list the original creditor? Part 1: Creditors with Priority Unsecured Claim	ns	
	GLADE ROAD	,	Part 2: Creditors with Nonpriority Unsecured C		
Coll	eyville, TX 76034	Last 4 digits of account number			
	and Address	On which entry in Part 1 or Part 2 did you	u list the original creditor? I Part 1: Creditors with Priority Unsecured Claim		
MEDICAL DATA SYSTEMS INC 2001 9TH AVE STE 312			Part 2: Creditors with Phonty Onsecured Claim Part 2: Creditors with Nonpriority Unsecured C		
Vero Beach, FL 32960		Last 4 digits of account number	, an at broakers that Horiphorny shoodards o		
hla	and Addross	On which entry in Part 1 or Part 2 did yo	Llist the original creditor?		
иате	and Address	On willon entry in real For Fait 2 did yo	a not the original ordanor.		

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Case 13 10403 an	ii Doc'i Litterea oin	20/13 14.43.41 Tage 3/ 0/ 00
Debtor 1 AUDRA RENEE ISRAEL		Case number (if known)
PLUS FOUR INC	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PLUS FOUR INC P.O. BOX 95846		Part 2: Creditors with Nonpriority Unsecured Claims
Las Vegas, NV 89193-5846	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
PORTFOLIO RECOVERY	Line 4.4 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
PORTFOLIO RECOVERY 140 CORPORATE BL STE 100		■ Part 2: Creditors with Nonpriority Unsecured Claims
Norfolk, VA 23502	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
PORTFOLIO RECOVERY	Line 4.23 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PORTFOLIO RECOVERY 140 CORPORATE BL STE 100 Norfolk, VA 23502		Part 2: Creditors with Nonpriority Unsecured Claims
Notion, VA 23502	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
PORTFOLIO RECOVERY	Line 4.21 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PORTFOLIO RECOVERY 140 CORPORATE BL STE 100 Norfolk, VA 23502		Part 2: Creditors with Nonpriority Unsecured Claims
NOTION, VA 20002	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
SHERRY A MOORE, ESQ.	Line 4.10 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
8691 W SAHARA AVENUE, STE 210		■ Part 2: Creditors with Nonpriority Unsecured Claims
Las Vegas, NV 89117	Last 4 digits of account number	
Part 4: Add the Amounts for Each Type of	Uneacured Claim	
		al reporting purposes only, 28 U.S.C. \$159. Add the amounts for each

s. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for eacl type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
Hom rune i	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
		,			
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	3,490.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	\$	51,307.13
		here.		Ψ	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	54,797.13
	•				

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	Case 19-10-	+03-abi D0C 1	Littered 01/23/19 14	.43.41 Page 30 01 00
Fill in this ir	nformation to identify you	r case:		
Debtor 1	AUDRA RENEE	ISDAFI		
	First Name	Middle Name	Last Name	
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name	
Inited State	s Bankruptcy Court for the:	DISTRICT OF NEV	ADA	
Case numbe	er			☐ Check if this is an
				amended filing
Official	Form 106G			
Schedi	ile G: Executo	ry Contracts	and Unexpired Le	ases 12/15
e as compl	ete and accurate as poss	ible. If two married pe	ople are filing together, both are	e equally responsible for supplying correct
nformation. dditional pa	If more space is needed, ages, write your name and	copy the additional p d case number (if kno	age, fill it out, number the entrie wn).	s, and attach it to this page. On the top of any
. Do you	have any executory conti	acts or unexpired lea	ses?	
•	,	•	your other schedules. You have r	nothing else to report on this form.
				le A/B:Property (Official Form 106 A/B).
exampl and une	e, rent, vehicle lease, cell expired leases.	phone). See the instru	ctions for this form in the instructio	nen state what each contract or lease is for (for n booklet for more examples of executory contracts on tracts on tract or lease is for
	n or company with whom Name, Number, Street, C	ity, State and ZIP Code	for lease State what the C	SHITAGE OF TEASE IS TO
2.1			dilita and this was the same of the same o	
Name				
Numb	er Street		manuschilder (19 pm - 1)	
City		State ZIP	Code	
2.2 Name				
Numb	er Street			
	er Greet	Clota ZID	Code	
2.3		State ZIP	Code	
Name				
Numb	er Street	A Company of the Comp		
City	110 MILES	State ZIP	Code	
2.4 Name	3		The state of the s	
			44444	
Numb	er Street			

ZIP Code

ZIP Code

State

State

City

Name

Number

City

Street

2.5

	Case 19-1040	19-abi Doc'i Ei	ileieu 01/25/19 1	4.49.41 Pa	ige 39 0	1 00
Fill in this i	information to identify your o	ase:				
Debtor 1	AUDRA RENEE IS					
Dobtor 2	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name			
United State	es Bankruptcy Court for the:	DISTRICT OF NEVADA				
Case numb	per					
(if known)						Check if this is an amended filing
	Form 106H					
Sched	ule H: Your Code	ebtors				12/15
your name	nd number the entries in the and case number (if known) ou have any codebtors? (If y	. Answer every question.			or any A	aditional Lagos, write
2. With Arizona	nin the last 8 years, have you a, California, Idaho, Louisiana,	lived in a community pro Nevada, New Mexico, Pue	perty state or territory? (rto Rico, Texas, Washingto	Community proper on, and Wisconsin.	rty states an .)	d territories include
	Go to line 3. . Did your spouse, former spou	use, or legal equivalent live	with you at the time?			
in line Form '	umn 1, list all of your codebt 2 again as a codebtor only i 106D), Schedule E/F (Official olumn 2.	f that person is a quaranto	or or cosigner, Make sure	you have listed	the creditor	r on Schedule D (Official
	Column 1: Your codebtor lame, Number, Street, City, State and Zl	P Code		Column 2: The ca Check all schedu		hom you owe the debt ly:
2	CHEYENNE ISRAEL 2200 N TORREY PINES DI Las Vegas, NV 89108	R #1145		■ Schedule D, □ Schedule E/F □ Schedule G EXETER FINAN	=, line	

Filli	in this information to identify your ca	ase:							
	otor 1 AUDRA REN				_				
1	otor 2 use, if filing)								
Unit	ed States Bankruptcy Court for the	DISTRICT OF NEVAD)A						
1	e number own)		AND AND PARKET			Check if this is: ☐ An amended ☐ A suppleme	nt showing po		chapter
Ωf	fficial Form 106I						is of the follow	ving date:	
	chedule I: Your Inc	omo				MM / DD/ Y	YYY		12/15
sup	is complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. 11: Describe Employment	are married and not filir	ng jointly, and your ith vou, do not inclu	spouse i de inforr	s livi natio	ng with you, inclu on about your spo	ide informati use. If more :	on about space is r	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing	spouse	
	If you have more than one job,	Form to one and adoption	■ Employed			☐ Emplo	yed		
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not er	nployed		
	employers.	Occupation	SUPERVISOR						
	Include part-time, seasonal, or self-employed work.	Employer's name	ASURION						
	Occupation may include student or homemaker, if it applies.	Employer's address	6605 GRAND M PKWY Las Vegas, NV		ITO			·	
		How long employed t	here? 3 YRS						
Par	t 2: Give Details About Mor	nthly Income				,			
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any l	ine, write \$0 in the	space. Includ	e your nor	n-filing
If yo	u or your non-filing spouse have me e space, attach a separate sheet to	ore than one employer, co this form.	ombine the informatio	n for all e	mplo	oyers for that perso	n on the lines	below. If y	ou need/
						For Debtor 1	For Debtor		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,108.33	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	4,108.33	\$	N/A_	

Official Form 1061 Schedule I: Your Income page 1

Debt	or 1	AUDRA RENEE ISRAEL		Case n	umber (if known)			
	Con	y line 4 here	4.	For [Debtor 1 4,108.33		otor 2 or ng spouse N/A	
	•			·	4,100,00	***************************************		
5.	List	all payroll deductions:	_			_		
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$ \$	N/A	
	5b.	Mandatory contributions for retirement plans	5b. 5c.	\$	0.00	\$	N/A N/A	
	5c.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5d. 5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$		+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,108.33	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A_	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	· \$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		I,108.33 + \$_		N/A = \$ 4,108.	33
11.	State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00							
12.	Add Write appl	the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines	sult is tl in Liab	ne com ilities a	bined monthly in nd Related <i>Data</i>	come.	12. \$ 4,108.	33
10	Da :	you expect an increase or decrease within the year after you file this form	2				Combined monthly incom	ı e
13.	ם אם	No.						
		Yes. Explain:						

Official Form 1061 Schedule I: Your Income page 2

Fill is	n this information to identify your case:				
Debte	***************************************		Check	t if this is:	
Daki				An amended filing	ng postpetition chapter
Debte (Spo	use, if filing)		□ <i>P</i>	3 expenses as of the	ne following date:
Unite	d States Bankruptcy Court for the: DISTRICT OF NEVADA			MM / DD / YYYY	•
Case (If kn	number own)				
Of	ficial Form 106J				
Be a	hedule J: Your Expenses as complete and accurate as possible. If two married people a mation. If more space is needed, attach another sheet to this aber (if known). Answer every question.	are filing together, bot s form. On the top of a	th are equa any addition	lly responsible for nal pages, write yo	12/19 supplying correct our name and case
Part	· · ·				
'.	■ No. Go to line 2. □ Yes, Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expense</i>	es for Separate Househ	old of Debto	or 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1	2	Dependent's age	Does dependent live with you?
	Do not state the dependents names.	DAUGHTER		17	□ No ■ Yes □ No □ Yes
					□ No □ Yes □ No
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				□Yes
Esti exp	Estimate Your Ongoing Monthly Expenses mate your expenses as of your bankruptcy filing date unless enses as of a date after the bankruptcy is filed. If this is a suplicable date.	you are using this fo pplemental <i>Schedule</i> a	rm as a sup J, check the	oplement in a Cha e box at the top of	oter 13 case to report the form and fill in the
the	ude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I:</i> icial Form 106I.)	eif you know Your Income	**************************************	Your expe	nses
4.	The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	. Include first mortgage	4. \$		1,200.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$ 4d. \$		0.00
5.	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as h	nome equity loans	4α. φ 5. \$		0.00
5.	Additional mortgage payments for your residence, such as h	nome equity loans	5. \$		0.00

Deb	tor 1 AUDRA RENEE ISRAEL	Case num	ber (if known)	
6.	Utilities:			
0.	6a. Electricity, heat, natural gas	6a.	\$	180.00
	6b. Water, sewer, garbage collection	6b.	\$	90.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	***************************************	517.00
	6d. Other. Specify:	6d.		0.00
7.	Food and housekeeping supplies	7.		
7. 3.	Childcare and children's education costs	7. 8.	φ \$	400.00
		9.		0.00
9.	Clothing, laundry, and dry cleaning		\$	0.00
	Personal care products and services	10.	\$	0.00
1.	Medical and dental expenses	11.	\$	60.00
2.	Transportation. Include gas, maintenance, bus or train fare.	12.	\$	100.00
2	Do not include car payments.	13.	· ———	
	Entertainment, clubs, recreation, newspapers, magazines, and books			0.00
	Charitable contributions and religious donations	14.	\$	0.00
5.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
	15a. Life insurance	15a.	·	0.00
	15b. Health insurance	15b.		0.00
	15c. Vehicle insurance	15c.	*	400.00
	15d. Other insurance, Specify: RENTERS INSURANCE	15d.	\$	24.00
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.	\$	0.00
7.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	475.00
	17b. Car payments for Vehicle 2	17b.	\$	333.75
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
8.	Your payments of alimony, maintenance, and support that you did not report as			
٠.	deducted from your pay on line 5, Schedule I, Your Income (Official Form 1061).	18.	\$	0.00
9.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sche	dule I: Yo	our Income.	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	***************************************	0.00
	20e. Homeowner's association or condominium dues	20e.		0.00
		21.	*	
٤١.	Other: Specify:	21.	тф	0.00
22	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	3,779.75
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
				272075
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,779.75
23	Calculate your monthly net income.		L	
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,108.33
	23b. Copy your monthly expenses from line 22c above.	23b.		3,779.75
	20b. Copy your monthly expenses nominate 220 above.	200.	Ψ	3,118.10
	23c. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	328.58
	The result is your monthly net moonie.		<u> </u>	
24	Do you expect an increase or decrease in your expenses within the year after yo	u file this	form?	
L-7.	For example, do you expect to finish paying for your car loan within the year or do you expect your	mortgage	payment to increase	or decrease because of a
	modification to the terms of your mortgage?	3.0-1		
	■ No.			
	Type Fxplain here:			

	-Ai A- id-waifu vous	22001			
	ation to identify your				
Debtor 1	AUDRA RENEE IS	SRAEL Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	kruptcy Court for the:	DISTRICT OF NEVADA			
Case number (if known)				☐ Check if this is amended filing	an
Official Form			valata da Cabaa	المالية	
Declarati	ion About a	ın Individual D	eptor's Sched	aules	12/15
obtaining money years, or both. 18	s form whenever you fi or property by fraud i B U.S.C. §§ 152, 1341, a n Below	n connection with a bankrup	amended schedules. Makir otcy case can result in fines	ng a false statement, concealing prope oup to \$250,000, or imprisonment for u	p to 20
Did you pay		eone who is NOT an attorney	y to help you fill out bankru		Matica
Under penal that they are X	value of person	that I have read the summa	ry and schedules filed with X Signature of Debtor		orm 119)
Date	January 24, 2019		Date	A source of the	

Eil	II in this information to identify yo	ur case:			
	ebtor 1 AUDRA RENE				
De	First Name	Middle Name	Last Name		
	ebtor 2 couse if, filing) First Name	Middle Name	Last Name		
	, 3 ,		Last Hallio		
Un	nited States Bankruptcy Court for the	e: DISTRICT OF NEVADA			
1	ase number known)				heck if this is an mended filing
********	fficial Form 107 tatement of Financia	I Affairs for Individ	luals Filing for B	ankruptcy	4/10
info nur	as complete and accurate as pos ormation. If more space is neede mber (if known). Answer every qu	d, attach a separate sheet to testion.	this form. On the top of any	equally responsible for sup additional pages, write you	plying correct ir name and case
		Marital Status and Where You	Liveu Belole		
1.	What is your current marital sta	itus r			
	☐ Married ■ Nature wind				
	■ Not married				
2.	During the last 3 years, have yo	ou lived anywhere other than	where you live now?		
	□ No				
	Yes. List all of the places yo	u lived in the last 3 years. Do no	ot include where you live now	•	
	Debtor 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	12638 ROLLING BOULDER Las Vegas, NV 89149	ST From-To:	☐ Same as Debtor ²		☐ Same as Debtor 1 From-To:
3. sta	Within the last 8 years, did you ates and territories include Arizona, and territories include Arizona, and the last S	ever live with a spouse or leg California, Idaho, Louisiana, Ne Schedule H: Your Codebtors (O	vada, New Mexico, Puerto R	ity property state or territor co, Texas, Washington and V	y? (Community property Visconsin.)
	· · · · · · · · · · · · · · · · · · ·				
4.	Did you have any income from Fill in the total amount of income If you are filing a joint case and y No Yes. Fill in the details.	employment or from operating	all businesses, including part	time activities.	ndar years?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	rom January 1 of current year unt ne date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$1,896.15	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

De	btor 1	AU	DRA REN	EE ISRAEL		Case	e number (if known)	
					Dahtau 4		Debtor 2	
					Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)		■ Wages, commissions, bonuses, tips	\$48,700.08	☐ Wages, commissions bonuses, tips	,			
					☐ Operating a business		Operating a business	
			lar year be December		■ Wages, commissions, bonuses, tips	\$27,629.00	☐ Wages, commissions bonuses, tips	,
					☐ Operating a business		☐ Operating a business	
	winnir	ngs. Ì ach s No	f you are fili	ng a joint cas	pensions; rental income; inte se and you have income that ome from each source separa	you received together, list it o	only once under Debtor 1.	; and gambling and lottery
					Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	ırt 3:	List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy		
6.	-	i ther No.	Neither De individual	ebtor 1 nor l primarily for a	's debts primarily consume Debtor 2 has primarily cons a personal, family, or househo	umer debts. Consumer debt eld purpose."		3 101(8) as "incurred by an
			During the	90 days before Go to line	ore you filed for bankruptcy, d 7.	id you pay any creditor a tota	I of \$6,425* or more?	
			□ Yes	List below paid that c	each creditor to whom you pa reditor. Do not include payme payments to an attorney for t	nts for domestic support obliq	in one or more payments a gations, such as child suppo	nd the total amount you ort and alimony. Also, do
			* Subject	to adjustmer	nt on 4/01/19 and every 3 year	rs after that for cases filed on	or after the date of adjustm	nent.
	•	Yes.			or both have primarily const ore you filed for bankruptcy, d		of \$600 or more?	
			■ No.	Go to line				
			□ _{Yes}	include pay	each creditor to whom you pa yments for domestic support o r this bankruptcy case.	id a total of \$600 or more an obligations, such as child sup	d the total amount you paid port and alimony. Also, do	that creditor. Do not not not include payments to an
	Cred	ditor'	s Name an	d Address	Dates of paymo	ent Total amount paid	Amount you Was the still owe	nis payment for

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Case number (if known)

Debi	tor 1	AUDRA RENEE ISRAEL		Case	number (if known)		
	Inside	n 1 year before you filed for bankruptors include your relatives; any general parch you are an officer, director, person in ness you operate as a sole proprietor. 11	tners; relatives of any gene	ral partners; partner more of their voting	snips of which yo securities: and ar	u are a general part ny managing agent,	including one for
		lo 'es. List all payments to an insider.					
		er's Name and Address	Dates of payment	Total amount	Amount you still owe	Reason for this	payment
	inside	n 1 year before you filed for bankrupto er? le payments on debts guaranteed or cos		ents or transfer a	ny property on a	ccount of a debt th	iat benefited an
		No					
		res. List all payments to an insider					
	Insid	ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this Include creditor's	name
Par	t 4:	Identify Legal Actions, Repossession	ns, and Foreclosures	4		All old of property and	
9.	List al	n 1 year before you filed for bankrupt Il such matters, including personal injury ications, and contract disputes.	cy, were you a party in any cases, small claims actions	/ lawsuit, court act , divorces, collection	tion, or administi n suits, paternity a	rative proceeding? rctions, support or c	ustody
		No					
		Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of the ca	se
	GAL PUF	DRA RENEE ISRAEL LAXY INTERNATIONAL RCHASING LLC 030853	COLLECTION	JUSTICE COUP VEGAS TOWNS REGIONAL JUST CENTER 200 LEWIS AVI Las Vegas, NV	SHIP STICE ENUE	☐ Pending ☐ On appeal ☐ Concluded	
10.	Withi Chec	in 1 year before you filed for bankrupt k all that apply and fill in the details belo	cy, was any of your prope w.	rty repossessed, f	oreclosed, garni	shed, attached, se	ized, or levied?
		No. Go to line 11.					
		Yes. Fill in the information below.					
	Cred	ditor Name and Address	Describe the Property		Date	!	Value of the property
			Explain what happened	l			
11.	acco	in 90 days before you filed for bankru unts or refuse to make a payment bed	ptcy, did any creditor, incl cause you owed a debt?	uding a bank or fii	nancial institutio	n, set off any amo	unts from your
		No					
		Yes. Fill in the details. ditor Name and Address	Describe the action the	creditor took	Date take	e action was n	Amoun
12.	With	in 1 year before you filed for bankrup t-appointed receiver, a custodian, or a	tcy, was any of your prope	erty in the possess	ion of an assign	ee for the benefit o	of creditors, a
		• •	another officials				
		No Yes					

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Case number (if known) Debtor 1 AUDRA RENEE ISRAEL Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Dates you gave Value Gifts with a total value of more than \$600 Describe the gifts the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Value Dates you Gifts or contributions to charities that total Describe what you contributed contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No ☐ Yes. Fill in the details. Describe any insurance coverage for the loss Date of your Value of property Describe the property you lost and lost how the loss occurred loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Amount of Description and value of any property Date payment Person Who Was Paid or transfer was payment transferred Address made Email or website address Person Who Made the Payment, if Not You 01/18/2019 \$200.00 BANKRUPTCY PREPARER FEE **JUAWANA TELLIS** 5135 CAMINO AL NORTE STE 267 North Las Vegas, NV 89031 JAYSDOCS4U@GMAIL.COM 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No

Description and value of any property

transferred

Address

Amount of

payment

Date payment

made

or transfer was

Yes. Fill in the details.

Person Who Was Paid

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Case number (if known)

	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.									
	■ No									
	Yes. Fill in the details.									
	Person Who Received Transfer Address	Description and va property transferre	d pa	scribe any property or yments received or debts id in exchange	Date transfer was made					
	Person's relationship to you		•	•						
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prof	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)								
	■ No									
	☐ Yes. Fill in the details.									
	Name of trust	Description and va	llue of the property tr	ansferred	Date Transfer was made					
Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Storage \	Jnits						
20	Within 1 year before you filed for bankruptcy	v. were any financial acc	ounts or instruments	s held in your name, or for	your benefit, closed,					
20.	Include checking, savings, money market, o houses, pension funds, cooperatives, associated No	r other financial accoun	ts; certificates of dep							
	Yes. Fill in the details.									
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, any safe	deposit box or other depo	sitory for securities,					
	No No									
	Yes. Fill in the details.			iba tha contants	Do you still					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had accommoder, State and ZIP Code)		ibe the contents	have it?					
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	· Na									
	■ No □ Yes, Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, SI State and ZIP Code)		ribe the contents	Do you still have it?					
Pal	rt 9: Identify Property You Hold or Control	for Someone Else								
23.			ıde any property you	borrowed from, are storing	g for, or hold in trust					
	_									
	■ No □ Yes. Fill in the details.		_		Volus					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)	y	ribe the property	Value					
Pa	rt 10: Give Details About Environmental Inf	ormation								
For	the purpose of Part 10, the following definiti	ons apply:								
	Environmental law means any federal, state	e. or local statute or requ	alation concerning po	ollution, contamination, rel	eases of hazardous or					

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Debtor 1 AUDRA RENEE ISRAEL

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1	ALID	RAF	RENEE	ISRAFI
CCDIOI	AUU	11741	\L.IVL	DIVALL

Case number (if known)

	regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							
Rep	ort a	ıll notices, releases, and proceedings th	at you know about, regardless of when	they occurred.				
24.	Has	any governmental unit notified you tha	t you may be liable or potentially liable ເ	under or in violation of an enviro	nmental law?			
		No						
		Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Hav	ve you notified any governmental unit of	any release of hazardous material?					
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26.	Hav	ve you been a party in any judicial or adr	ninistrative proceeding under any envir	onmental law? Include settlemer	nts and orders.			
		No						
		Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Pai	t 11	Give Details About Your Business or	Connections to Any Business					
27.	Wit	hin 4 years before you filed for bankrupt	cy, did you own a business or have any	of the following connections to	any business?			
		☐ A sole proprietor or self-employed i	n a trade, profession, or other activity, e	either full-time or part-time				
		☐ A member of a limited liability comp	oany (LLC) or limited liability partnership	p (LLP)				
		☐ A partner in a partnership						
		☐ An officer, director, or managing ex	ecutive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	No. None of the above applies. Go to Part 12.							
			in the details below for each business.					
		siness Name	Describe the nature of the business	Employer Identification nun				
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Secui	rity number or ITIN.			
	•		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Dates business existed				
28.		hin 2 years before you filed for bankrupt titutions, creditors, or other parties.	cy, did you give a financial statement to	o anyone about your business? I	nclude all financial			
		No						
		Yes. Fill in the details below.						
	Ad	me Idress mber, Street, City, State and ZIP Code)	Date Issued					
Pai	t <u>12</u> :	Sign Below						

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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Debtor 1 AUDRA RENEE ISRAEL	Case number (if known)
	g false statement, concealing property, or obtaining money or property by fraud in connection to \$250,000, or imprisonment for up to 20 years, or both. Signature of Debtor 2
Date January 24, 2019	Date
Did you attach additional pages to <i>Your State</i> ■ No □ Yes	ement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is ☐ No	not an attorney to help you fill out bankruptcy forms?

Yes. Name of Person ____JUAWANA TELLIS __. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Till in this info					
	mation to identify your c				
Debtor 1	AUDRA RENEE IS	RAEL Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NE	VADA		
Case number (if known)					neck if this is an nended filing
Official Fo		ı for Indiv	iduals Filing Under Cha _l	oter 7	12/15
creditors have lease You must file th	ever is earlier, unless the	r property, or d the lease has no hin 30 days after y		e set for the meel o the creditors an	ting of creditors, Id lessors you list
sign al Be as complete write y	nd date the form.	. If more space is per (if known).	th are equally responsible for supplying corre		
1. For any credit	tors that you listed in Par		Creditors Who Have Claims Secured by Prop	perty (Official For	n 106D), fill in the
information b Identify the cr	elow. editor and the property the	it is collateral	What do you intend to do with the property secures a debt?		claim the property npt on Schedule C?
name:	CHRYSLER CAPITAL f 2017 JEEP RENEGADE 25000		 ☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. 	□ No ■ Yes	
property securing debt	miles		Retain the property and [explain]: CONTINUE MAKING MONTHLY PAYMENTS		
Creditor's E	EXETER FINANCE, LLC	;	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No	
	2015 KIA OPTIMA 7	3000 miles	Retain the property and enter into a Reaffirmation Agreement.	■ Yes	
property securing debt:	:		■ Retain the property and [explain]: CONTINUE MAKING MONTHLY PAYMENTS		
Part 2: List Y	our Unexpired Personal	Property Leases			

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Debtor 1 AUDRA RENEE ISRAEL	ANTANININA (ANTANININA (ANTANININA (ANTANININA (ANTANININA (ANTANININA (ANTANININA (ANTANININA (ANTANININA (AN	Case number (if known)	Name of the Control o
Describe your unexpired personal prop	Will the lease be assumed?		
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			□ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Lessor's name:			□ No
Description of leased Property:			☐ Yes
Part 3: Sign Below			
Under penalty of perjury, I declare that I	have indicated my intention about any pro	perty of my estate that se	cures a debt and any personal
property that is subject to an unexpired	X		
AUDRA RENEE ISRAEL Signature of Debtor 1		e of Debtor 2	
Date January 24, 2019	Date		

Fill in this	s information to identify your case:		Check or	ne box only as d	irected in this form and in F	Form
Debtor 1	AUDRA RENEE ISRAEL		122A-1S	upp:		
Debtor 2 (Spouse, if	iling)		■ 1.7	There is no pres	umption of abuse	
United S	tates Bankruptcy Court for the: District of Nevada	www.a.,		applies will be n	o determine if a presumptionade under <i>Chapter 7 Mea</i>	
Case nul (if known)	mber		3.1	The Means Test	icial Form 122A-2). does not apply now becau	
				······································	service but it could apply	later.
Officia	ol Form 100A 1		⊔Cr	neck if this is a	n amended filing	
	al Form 122A - 1					
Cnap	ter 7 Statement of Your Cur	rent Monthl	y Incom	е		12/15
attach a se case numi	plete and accurate as possible. If two married people as eparate sheet to this form. Include the line number to weer (if known). If you believe that you are exempted fro military service, complete and file Statement of Exemp Calculate Your Current Monthly Income	hich the additional info m a presumption of abu	rmation applies	. On the top of a	ny additional pages, write yo marily consumer debts or be	ur name and
1. Wh	at is your marital and filing status? Check one or	ily.				
	Not married. Fill out Column A, lines 2-11.	•				
	Married and your spouse is filing with you. Fill ou	ıt both Columns A anc	I B. lines 2-11			
	Married and your spouse is NOT filing with you.		•			
_	I Living in the same household and are not lega			A and B lines	2_11	
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are living apart for reasons that do not include evading	out Column A, lines 2- egally separated unde	11; do not fill ou r nonbankrupto	ut Column B. By y law that appli	checking this box, you dec es or that you and your spo	
101(10 the 6 m	he average monthly income that you received from all A). For example, if you are filing on September 15, the 6-m onths, add the income for all 6 months and divide the total s own the same rental property, put the income from that p	sources, derived during onth period would be Ma by 6. Fill in the result. Do	the 6 full mont rch 1 through Au not include any	hs before you file gust 31. If the amo income amount m	e this bankruptcy case. 11 U. bunt of your monthly income va ore than once. For example, if	ried during both
			Colui Debt		Column B Debtor 2 or non-filing spouse	**************************************
	r gross wages, salary, tips, bonuses, overtime, roll deductions).	and commissions (be	efore all \$	3,792.30	\$	
	nony and maintenance payments. Do not include imn B is filled in.	payments from a spot	use if	0.00	\$	
of y from and	amounts from any source which are regularly pa ou or your dependents, including child support. I an unmarried partner, members of your household roommates. Include regular contributions from a sp I in. Do not include payments you listed on line 3.	Include regular contri I, your dependents, pa	butions rents,	0.00	\$	
	income from operating a business, profession,	or farm				
	-	Debtor 1				
Gro	ss receipts (before all deductions)	\$0.00				
Ord	nary and necessary operating expenses	-\$ 0.00			_	
	monthly income from a business, profession, or far	n \$0.00 Copy	here -> \$	0.00	\$	
6. Net	income from rental and other real property	5.14.4				
_		Debtor 1				
	ss receipts (before all deductions)	\$ <u>0,00</u> -\$ <u>0,00</u>				
	nary and necessary operating expenses		hara > ¢	0.00	\$	
	monthly income from rental or other real property	\$ <u>0.00</u> Copy		0.00	\$	
 7. Inte 	rest, dividends, and rovalties		\$	0.00	Ŧ	

Official Form 122A-1

Debto	AUDRA RENEE ISRAEL			Case numbe	r (if Known)	-		
				Column A Debtor 1		Column B Debtor 2	or .	
8.	Unemployment compensation			\$	0.00	\$		
	Do not enter the amount if you contend that the amoun the Social Security Act. Instead, list it here:		fit under					
	For you \$ For your spouse \$	0.	00_					
	For your spouse\$							
9.	Pension or retirement income. Do not include any arbenefit under the Social Security Act.	nount received that wa	is a	\$	0.00	\$		
10.	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	Security Act or paymer manity, or internationa	nts I or					
	•		<u>_</u>	\$	0.00			
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.	Calculate your total current monthly income. Add lie each column. Then add the total for Column A to the to	nes 2 through 10 for tal for Column B.	\$	3,792.30	+ \$		= \$	3,792.30
Pari	Determine Whether the Means Test Applies	to You			Market Co.	······································	incom	10
12	Calculate your current monthly income for the year	. Follow these steps:						
	12a. Copy your total current monthly income from line	11		Cop	y line 11	here=>	\$	3,792.30
	Multiply by 12 (the number of months in a year)						X	
	12b. The result is your annual income for this part of the	e form				12	2b. \$	45,507.60
13	Calculate the median family income that applies to	you. Follow these ste	ps:				L	
	Fill in the state in which you live.	NV						
	Fill in the number of people in your household.	2						
	Fill in the median family income for your state and size					. 13	3. \$	61,820.00
	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link s cruptcy clerk's office.	specified	in the sepai	ate instruc	ctions		
14	How do the lines compare?							
	Line 12b is less than or equal to line 13. C Go to Part 3. Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.							'22A-2.
Par								
	By signing here, I declare under penalty of verjur X AUDRA RENEE ISRAEL Signature of Debtor 1	that the information o	on this st	atement and	I in any att	achments is	true and o	correct.
	Date January 24, 2019 MM / DD / YYYY							
	If you checked line 14a, do NOT fill out or file For							
	If you checked line 14b, fill out Form 122A-2 and	file it with this form.						

United States Bankruptcy Court District of Nevada

In re	AUDRA RENEE ISRAEL		Case No.			
		Debtor(s)	Chapter	7		
	VERIFICATION OF CREDITOR MATRIX					
		\wedge				
The ab	ove-named Debtor hereby verifies that the atta	ched list of creditors is true and	correct to the best	of his/her knowledge.		

AUDRA RENEE ISF

Signature of Debtor

Date: January 24, 2019

AUDRA RENEE ISRAEL 2200 N TORREY PINES DR #1145 Las Vegas, NV 89108

JANEE ALLEN
P.O. BOX 570422
Las Vegas, NV 89157

AARGON AGENCY INC Acct No 5203 AARGON AGENCY INC 8668 SPRING MOUINTAIN ROAD Las Vegas, NV 89117

ACIMA CREDIT
9815 S MONROE ST 4TH FLOOR
Sandy, UT 84070

BIG PICTURE LOANS 521 S MAIN ST FINLAY Findlay, OH 45840

CAPITAL ON E BANK USA NA Acct No 2917 P.O. BOX 961245 Fort Worth, TX 76161

CAPITAL ONE
Acct No 2320
CAPITAL ONE
P.O. BOX 30253
Salt Lake City, UT 84130-0253

CARMAX AUTO FINANCE CARMAX AUTO FINANCE P.O. BOX 440609 Kennesaw, GA 30160

CASH FACTORY USA CASH FACTORY USA 6965 S RAINBOW BLVD STE 130 Las Vegas, NV 89118

CENTENNIAL HILLS HOSPITAL Acct No 0572 CENTENNIAL HILLS HOSPITAL P.O. BOX 31001-0827 Pasadena, CA 91110-0827

CHEYENNE ISRAEL 2200 N TORREY PINES DR #1145 Las Vegas, NV 89108 CHRYSLER CAPITAL Acct No 2917 P.O. BOX 961245 Fort Worth, TX 76161

DESERT RADIOLOGY SOLUTIONS LLC Acct No 9779
DESERT RADIOLOGY SOLUTIONS LLC P.O. BOX 1645
Indianapolis, IN 46206

DEVILLE ASSET MGMT Acct No 3234 1132 GLADE ROAD Colleyville, TX 76034

EXETER FINANCE, LLC Acct No 4944 P.O. BOX 166097 Irving, TX 75016

FINGERHUT/WEBBANK Acct No 1980 6250 RIDGEWOOD RD Saint Cloud, MN 56303-0820

GALAXY INTERNATIONAL PURCHASING LLC Acct No 2645 4730 SOUTH FORT APACHE ROAD Las Vegas, NV 89147

KOHLS/CAPONE Acct No 5065 KOHLS/CAPONE P.O. BOX 3115 Milwaukee, WI 53201

MAB&T RETAIL
Acct No 0063
P.O.BOX 4499
Beaverton, OR 97076-4499

MARINELLO SCHOOLS OF BEAUTY Acct No 3234 5001 E BONANZA STE 110 Las Vegas, NV 89110

MEDICAL DATA SYSTEMS INC Acct No 0572 2001 9TH AVE STE 312 Vero Beach, FL 32960 MOBILOANS, LLC Acct No 3426 P.O. BOX 42917 Philadelphia, PA 19101

MOUNTAIN SUMMIT FINANCIAL 635 EAST HWY #20 F
Upper Lake, CA 95485

MOUNTAINVIEW HOSPITAL MOUNTAINVIEW HOSPITAL PO BOX 740766 Cincinnati, OH 45274

PLUS FOUR INC Acct No 9779 PLUS FOUR INC P.O. BOX 95846 Las Vegas, NV 89193-5846

PORTFOLIO RECOVERY Acct No 2320 PORTFOLIO RECOVERY 140 CORPORATE BL STE 100 Norfolk, VA 23502

PORTFOLIO RECOVERY Acct No 9994 PORTFOLIO RECOVERY 140 CORPORATE BL STE 100 Norfolk, VA 23502

PORTFOLIO RECOVERY Acct No 0050 PORTFOLIO RECOVERY 140 CORPORATE BL STE 100 Norfolk, VA 23502

PROGRESSIVE INSURANCE COMPANY 6300 WILSON MILLS ROAD Cleveland, OH 44143

RAPID CASH RAPID CASH 5676 S EASTERN AVE Las Vegas, NV 89119

SHADOW EMERGENCY PHYSICIANS Acct No 7360 P.O. 390915 Minneapolis, MN 55479 SHERRY A MOORE, ESQ. Acct No 2645 8691 W SAHARA AVENUE, STE 210 Las Vegas, NV 89117

SNAP FINANCE P.O. BOX 26561 Salt Lake City, UT 84126

SYNCB/OLD NAVY Acct No 0050 SYNCB/OLD NAVY P.O. BOX 965005 Orlando, FL 32896

UMC Acct No 5203 UMC 1800 WEST CHARLESTON AVE Las Vegas, NV 89102

US BANK Acct No 9994 CRA MANAGEMENT P.O. BOX 3447 Oshkosh, WI 54903

US DEPT OF EDUCATION/GLE Acct No 9679 2401 INTERNANTIONAL P.O. BOX 7859 Madison, WI 53704